

Extreme Etiquette an Etiquette & Leadership Program

Registration Form

(Please fill in all information)

Date: _____ Graduation Year: _____ Current Grade: _____ Previous EE Student _____

(Please provide the student's full proper name)

First Name: _____ Middle Name: _____ Last Name: _____

School: _____ Gender: _____ Home Phone: _____

Address: _____ Student Cell Phone: _____

City: _____ State: _____ Zip: _____ Cell Carrier: _____

Email: _____ Date of Birth: _____

(For invitations and announcements)

Father's Full Name: _____ Mother's Full Name: _____

Father's Address: _____ Mother's Address: _____

_____ Zip: _____ _____ Zip: _____

Phone (w) _____ Phone (w) _____

Phone (h) _____ © _____ Phone (h) _____ © _____

Student Activities: _____ Cell Carrier: _____

Brother: _____ Age: _____ Sister: _____ Age: _____

Brother: _____ Age: _____ Sister: _____ Age: _____

Friends that might be interested: _____

Gender: _____ Age: _____ Grade: _____ Phone: _____ School: _____

Parents Full Name: _____

Address: _____

City: _____ Zip: _____

Release Statement: Extreme Etiquette, Inc. has my permission to use photographs and/or video of my child/children in advertising and/or marketing of Extreme Etiquette, Inc. programs, including, but not limited to, their web site, brochures, newspaper advertising, news articles, any printed material, etc. I understand the use of such photos will reflect a positive image on my child/children and the programs. I also understand Extreme Etiquette, Inc. will NOT use photos of my child/children for any other purpose(s) other than advertising, marketing, and public relations for Extreme Etiquette, Inc. programs.

Parent Signature

Date

Extreme Etiquette, Inc. 11 Yacht Club Drive, Fort Walton Beach, Florida 32548 (850) 244-6521

Checks Payable to Extreme Etiquette, Inc. Date of Payment: _____ Method: Check # _____ PayPal _____ Cash _____